Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: | | |
|-------------------------------------------------|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Brandon First name R. Middle name Crossno Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5316 | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 2 of 48

Case number (if known)

Debtor 1 Brandon R. Crossno

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 257 Allegro Lane Carol Stream, IL 60188 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **DuPage** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 3 of 48

Debtor 1 Brandon R. Crossno

Case number (if known)

| ar | t 2: Tell the Court About | our B | ankruptcy Ca | ise | | | | | |
|------------|-------------------------------------------------------------------------------------------------------------------|------------|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------|-------------------------------------------|-------------------------------|--------------------------------------------------------------------------------------------|
| 7. | The chapter of the Bankruptcy Code you are | | | one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | |
| | choosing to file under | ■ C | hapter 7 | | | | | | |
| | | □с | hapter 11 | | | | | | |
| | | □с | hapter 12 | | | | | | |
| | | | hapter 13 | | | | | | |
| | | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Typ attorney is sub | oically, if you are | e paying the | fee yourself, you r | may pay with cash, cas | al court for more details shier's check, or money redit card or check with |
| | | | | | tallments. If yo | | s option, sign and | attach the Application | for Individuals to Pay |
| | | | but is not req applies to you | uired to, waive ur family size ar | your fee, and m nd you are unab | ay do so only le to pay the | y if your income is fee in installment | less than 150% of the | 7. By law, a judge may, e official poverty line that option, you must fill out r petition. |
| | Have you filed for | | | | | | | | |
| , . | bankruptcy within the | ■ No | | | | | | | |
| | last 8 years? | ☐ Ye | | | | VA // | | 0 | |
| | | | District | | | When | | _ Case number | |
| | | | District | | | When | | _ | |
| | | | District | | | vvnen | | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No |) | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | es. | | | | | | |
| | | | Debtor | | | | | Relationship to you | |
| | | | District | | | When | | Case number, if know | wn |
| | | | Debtor | | | | | Relationship to you | |
| | | | District | - | | When | | Case number, if know | wn |
| 11. | Do you rent your | ■ No | Go to I | ine 12. | | | | | |
| | residence? | □ Ye | es. Has yo | our landlord obta | ained an evictio | n judgment a | against you and do | you want to stay in yo | our residence? |
| | | | | No. Go to line | 12. | | | | |
| | | | | Yes. Fill out In bankruptcy pe | | About an Evi | ction Judgment Ag | gainst You (Form 101 <i>i</i> | A) and file it with this |
| | | | | | | | | | |

| | | Document | Page 4 of 48 | |
|----------|--------------------|----------|--------------|------------|
| Debtor 1 | Brandon R. Crossno | | Case number | (if known) |

| Part | Report About Any Bu | sinesses | You Own | as a Sole Proprietor | | | |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of business | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | Number, Street, City, State & ZIP Code | | | |
| | it to this petition. | | Check | heck the appropriate box to describe your business: | | | |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor? | deadlines operation | e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate is. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ins, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chapter 1 | 1. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fi Code. | ing under Chapter 11, b | ut I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | ☐ Yes. | I am fi | ing under Chapter 11 ar | d I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Part | Poport if You Own or | Have Any | Hazarda | us Proporty or Any Pro | perty That Needs Immediate Attention | | |
| | | | i iazai uo | us i roperty of Ally i ro | perty That Needs infinediate Attention | | |
| 14. | Do you own or have any property that poses or is | No. | | | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | ne hazard? | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | ate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | ber, Street, City, State & Zip Code | | |
| | | | | | | | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 5 of 48

Debtor 1 Brandon R. Crossno

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 6 of 48 Case number (if known) Debtor 1 Brandon R. Crossno Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **2**5,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Brandon R. Crossno | |
|---------------------------------------------|-----------------------|
| Brandon R. Crossno Signature of Debtor 1 | Signature of Debtor 2 |
| Executed on November 14, 2017 | Executed on |
| MM / DD / YYYY | MM / DD / YYYY |

Debtor 1 Brandon R. Crossno Document Page 7 of 48 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Arthur | W. Rummler | Date | November 14, 2017 |
|------------------------|-------------------------|---------------|--------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Arthur W. Printed name | Rummler | | |
| Law Office | es of Arthur W. Rummler | | |
| Firm name | | | |
| 799 Roose | evelt Road | | |
| Suite 2-10 | 4 | | |
| Glen Ellyn | ı, IL 60137 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 630-229-2313 | Email address | arthur.rummler@gmail.com |
| 6207593 | | | |
| Por number 9 C | toto | | |

| | | Docume | ent Page 8 of 48 | |
|---------------------|--------------------------|-------------------|------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Brandon R. Cross | sno | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | amended ming |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------|
| | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 2,381.89 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 2,381.89 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 27,878.3 |
| | Your total liabilities | \$ | 27,878.39 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,852.77 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,490.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sch | nedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | ı personal, | family, or |

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 17-35224 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Doc 1 Document

Page 9 of 48
Case number (if known) Debtor 1 Brandon R. Crossno

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 3,330.51 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | im |
|------------------------------------------------------------------------------------------------------------------------------|-----------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 9,000.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 9,000.00 |

| | | Documen | t Page 10 of 48 | |
|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| Fill in this inforr | mation to identify your | case and this filing: | | |
| Debtor 1 | Brandon R. Cros | SSNO Middle Name | Last Name | |
| Debtor 2 | | made Hame | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF | FILLINOIS | |
| Case number _ | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 106A/B | | | |
| Schedul | e A/B: Prop | ertv | | 12/15 |
| think it fits best. B information. If more Answer every questions. Part 1: Describe | de as complete and accurate space is needed, attach stion. Each Residence, Building | ate as possible. If two married parties at separate sheet to this form. g, Land, or Other Real Estate You | | ible for supplying correct |
| I. Do you own or I | have any legal or equitabl | e interest in any residence, bui | ilding, land, or similar property? | |
| No. Go to Par | rt 2. | | | |
| ☐ Yes. Where is | s the property? | | | |
| Part 2: Describe | Your Vehicles | | | |
| | • | tility vehicles, motorcycles | G: Executory Contracts and Unexpired Leases. | |
| | | | vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories | |
| ■ No □ Yes | | | | |
| | | | ries from Part 2, including any entries for | \$0.00 |
| | | | | |
| Part 3: Describe | Your Personal and Hous | sehold Items | | |
| | | ehold Items table interest in any of the f | ollowing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Do you own or I 6. Household go Examples: Ma | have any legal or equitocompodes and furnishings ajor appliances, furniture | | following items? | portion you own? Do not deduct secured |
| Do you own or logo 6. Household go Examples: Ma | have any legal or equitocompodes and furnishings ajor appliances, furniture | table interest in any of the f | following items? | portion you own? Do not deduct secured |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Case 17-35224 Page 11 of 48

Case number (if known)

Document Debtor 1 Brandon R. Crossno

| TV, laptop, phone | | \$500.00 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------------------------------------------|
| 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art of other collections, memorabilia, collectibles No Yes. Describe | objects; stamp, coir | n, or baseball card collections; |
| 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf musical instruments ■ No □ Yes. Describe | clubs, skis; canoes | and kayaks; carpentry tools; |
| 10. Firearms | | |
| Ruger 9mm Handgun | | \$300.00 |
| 11. Clothes | | |
| 12. Jewelry | ry, watches, gems, | gold, silver |
| 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No □ Yes. Describe | | |
| 14. Any other personal and household items you did not already list, including any health aids ■ No □ Yes. Give specific information | s you did not list | |
| 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you for Part 3. Write that number here | ı have attached | \$1,000.00 |
| Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand whe No □ Yes | en you file your peti | tion |
| 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit institutions. If you have multiple accounts with the same institution, list each. | unions, brokerage | houses, and other similar |
| □ No ■ YesInstitution name: | | |

| Deb | otor 1 | Case 17-35224 Brandon R. Crossno | | Filed 11/27/17 Document | Entered 11/27/17 17:53:57 Page 12 of 48 Case number (if known) | Desc Main |
|-----|----------------------------|----------------------------------------------------------|-----------------------------|-----------------------------|---------------------------------------------------------------------------------------------|-------------------------------|
| 20. | | Dianaon II. Orossiic | <u> </u> | | | |
| | | 17.1. | Checking | Bank of A number:1 | America Checking Account 421 | \$0.00 |
| | | 17.2. | Savings | Bank of A | America Savings Account #: 3301 | \$6.00 |
| 18. | | mutual funds, or public les: Bond funds, investme | | | ney market accounts | |
| | ■ No □ Yes | | Institution or is | ssuer name: | | |
| | joint ve | | interests in in | corporated and uninc | orporated businesses, including an interes | t in an LLC, partnership, and |
| _ | ■ No □ Yes. | Give specific information Nar | about them ne of entity: | | % of ownership: | |
| 20. | Negotia | | ersonal check | s, cashiers' checks, pro | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| | ■ No □ Yes. 0 | Give specific information a | about them uer name: | | | |
| | <i>Examp</i> ⊒ No | | SA, Keogh, 40° | 1(k), 403(b), thrift saving | s accounts, or other pension or profit-sharing | plans |
| | Yes. I | ist each account separate. Type c | ely. of account: | Institution r | name: | |
| | | 403b | | Presence | Health Retirement Plan | \$1,368.00 |
| | | 403b | | Pingree (retiremer | Grove Fire Protection District | \$7.89 |
| _ | Your sh | | s you have ma | | tinue service or use from a company ctric, gas, water), telecommunications compar | nies, or others |
| | | | | Institution r | name or individual: | |
| _ | Annuiti ■ No | es (A contract for a period | dic payment of | money to you, either fo | r life or for a number of years) | |
| | ☐ Yes | | e and descript | | | |
| 2 | | s in an education IRA, in C. §§ 530(b)(1), 529A(b), a | | n a qualified ABLE pro | ogram, or under a qualified state tuition pro | ogram. |
| | ☐ Yes | | | | ne records of any interests.11 U.S.C. § 521(c): | |
| _ | Trusts, ■ _{No} | equitable or future inter | ests in prope | rty (other than anythir | ng listed in line 1), and rights or powers exe | ercisable for your benefit |
| _ | | Give specific information | about them | | | |
| _ | Examp | s, copyrights, trademark les: Internet domain name | | | | |
| | ■ No | Give specific information | about them | | | |

| | | Case 17-3 | 35224 | Doc 1 | Filed 11/27/17 Document | Entered 11/27/17 17:53:57 Page 13 of 48 | Desc Main |
|-----|---------------------------|--------------------------------------------------------------|----------------------------|-----------------------------|------------------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------|
| D | ebtor 1 | Brandon R. | Crossno | | Document | Case number (if known) | |
| 27. | Examµ ■ No | es, franchises, a oles: Building per Give specific inf | mits, exclu | sive licenses | ngibles , cooperative association | n holdings, liquor licenses, professional licens | es |
| M | oney or | property owed t | o you? | | | | Current value of the portion you own? Do not deduct secured |
| 28. | ■ No | funds owed to y | | oout them, in | Sluding whather you alrea | ady filed the returns and the tax years | claims or exemptions. |
| | □ 163. | Oive specific find | orriation at | out them, me | sidding whether you alle | ady filed the returns and the tax years | |
| 29. | Exam _i ■ No | support ples: Past due or Give specific info | | | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| 30. | Examp | benefits; un | es, disabili paid loans | ty insurance | payments, disability ben someone else | efits, sick pay, vacation pay, workers' compe | nsation, Social Security |
| | | Give specific inf | | | | | |
| 31. | Examµ ■ No | | bility, or life | | | HSA); credit, homeowner's, or renter's insurar | nce |
| | ⊔ Yes. | Name the insura | | iny of each p pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| 32. | If you a some of | | ry of a living | | someone who has die ct proceeds from a life in | ed surance policy, or are currently entitled to rec | eive property because |
| 33. | Exam _l ■ No | | mploymen | | you have filed a lawsui surance claims, or rights | it or made a demand for payment s to sue | |
| 34. | ■ No | - | • | ed claims of | every nature, includin | g counterclaims of the debtor and rights to | set off claims |
| 35. | | Describe each on ancial assets you | | already list | | | |
| | ■ No □ Yes. | Give specific inf | ormation | | | | |
| 36 | | | | | om Part 4, including a | ny entries for pages you have attached | \$1,381.89 |
| Pa | art 5: De | scribe Any Busine | ss-Related | Property You | Own or Have an Interest | In. List any real estate in Part 1. | |
| 37. | Do you | own or have any le | egal or equi | table interest | in any business-related p | roperty? | |
| | _ | to Part 6. | | | | | |
| | ⊔ Yes. 0 | Go to line 38. | | | | | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Page 14 of 48

Case number (if known) Document Debtor 1 Brandon R. Crossno Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,000.00 Part 4: Total financial assets, line 36 \$1,381.89 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$2,381.89

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,381.89

\$2,381.89

| 1707.111111.111 1 1707. 13 (1) 40 |
|-----------------------------------------------------------------------|
| Fill in this information to identify your case: |
| Debtor 1 Brandon R. Crossno |
| First Name Middle Name Last Name |
| Debtor 2 |
| (Spouse if, filing) First Name Middle Name Last Name |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |
| Case number |
| (if known) |
| |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property | √ You Claim as Exempt |
|-------------------------------|-----------------------|
|-------------------------------|-----------------------|

| 1. | Which set of exemptions ar | e you claiming? | Check one only. | even if | your spouse is | s filing | with y | ou. |
|----|----------------------------|-----------------|-----------------|---------|----------------|----------|--------|-----|
| | | | | | | | | |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|-------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Miscellaneous household goods and furnishings. TV and Xbox. | \$200.00 | \$200.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| TV, laptop, phone Line from Schedule A/B: 7.1 | \$500.00 | \$500.00 | 735 ILCS 5/12-1001(b) |
| Ente from Genedate Av.B. 111 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Ruger 9mm Handgun Line from Schedule A/B: 10.1 | \$300.00 | \$300.00 | 735 ILCS 5/12-1001(b) |
| Ente from Genedate AVE. 1611 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Savings: Bank of America Savings | \$6.00 | \$6.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 17.2 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| 403b: Presence Health Retirement | \$1,368.00 | \$1,368.00 | 735 ILCS 5/12-1006 |
| Line from Schedule A/B: 21.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 16 of 48 Case number (if known) Debtor 1 Brandon R. Crossno Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 403b: Pingree Grove Fire Protection 735 ILCS 5/12-1006 \$7.89 \$7.89 District retirement plan Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1 | Brandon R. Cross | sno | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | Case 17-35224 1 | Document | Page 18 of 48 | Desc Main |
|-----------------------------------|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Fill in t | his information to identify your | | | |
| Debtor | 1 Brandon R. Cros | sno | | |
| | First Name | Middle Name | Last Name | |
| Debtor | | | | |
| (Spouse in | f, filing) First Name | Middle Name | Last Name | |
| United | States Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | |
| Case n | umber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Officia | al Form 106E/F | | | |
| | dule E/F: Creditors W | /ho Have Unsecured | l Claime | 12/15 |
| | | | TY claims and Part 2 for creditors with NONPRIOR | |
| Schedule eft. Attac name an | e D: Creditors Who Have Claims Sec ch the Continuation Page to this pag d case number (if known). | cured by Property. If more space is ge. If you have no information to re | Do not include any creditors with partially secure s needed, copy the Part you need, fill it out, numbe eport in a Part, do not file that Part. On the top of a | er the entries in the boxes on the |
| Part 1: | | | | |
| | any creditors have priority unsecure | ed claims against you? | | |
| | No. Go to Part 2. | | | |
| Dort 2: | _ | FV Umanaumad Claima | | |
| Part 2: | | | | |
| | any creditors have nonpriority unse | <u> </u> | | |
| ш | No. You have nothing to report in this p | part. Submit this form to the court with | n your other schedules. | |
| • | Yes. | | | |
| unse | ecured claim, list the creditor separated none creditor holds a particular claim, | ly for each claim. For each claim liste | the creditor who holds each claim. If a creditor has ed, identify what type of claim it is. Do not list claims al a have more than three nonpriority unsecured claims fi | Iready included in Part 1. If more |
| | · - | | | Total claim |
| 4.1 | Alexian Brothers Medical G | Froup Last 4 digits of ac | count number A380 | \$300.00 |
| | Nonpriority Creditor's Name | | | |
| | P.O Box 14000 Belfast, ME 04915 | When was the deb | ot incurred? | |
| | Number Street City State Zlp Code | As of the date you | I file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | , | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and an | other Type of NONPRIO | RITY unsecured claim: | |
| | \square Check if this claim is for a com | munity | | |
| | debt Is the claim subject to offset? | Obligations arisi report as priority cla | ing out of a separation agreement or divorce that you | did not |
| | No | | on or profit-sharing plans, and other similar debts | |
| | □ Yes | | Unpaid Medical Bills | |
| | □ res | Other. Specify | Olipaiu Meulcai Dilis | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 19 of 48

Debtor 1 Brandon R. Crossno Case number (if know) 4.2 \$843.02 **Bank of America** Last 4 digits of account number 6003 Nonpriority Creditor's Name c/o NCB Management Services When was the debt incurred? PO Box 1099 Langhorne, PA 19047 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Bryan Murphy** Last 4 digits of account number \$6,000.00 Nonpriority Creditor's Name When was the debt incurred? 1930 Wildwood Ln Hanover Park, IL 60133 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Rent 4.4 Fitness 1 Health Club Last 4 digits of account number 1885 \$235.00 Nonpriority Creditor's Name P.O Box 790001 When was the debt incurred? Sunrise Beach, MO 65079 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

Official Form 106 E/F

■ No

☐ Yes

■ Other. Specify Credit Card

☐ Debts to pension or profit-sharing plans, and other similar debts

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 20 of 48

Debtor 1 Brandon R. Crossno Case number (if know) 4.5 \$9,000.00 **Great Lakes Student Loans** Last 4 digits of account number Nonpriority Creditor's Name PO Box 7860 When was the debt incurred? Madison, WI 53707-7860 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Student Loan 4.6 **Opportunity Financial LLC** Last 4 digits of account number \$2,391.24 Nonpriority Creditor's Name One Prudential Plaza When was the debt incurred? 130 E. Randolph Street, Suite 3400 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Debtor 2 only Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Loan **Professional Recovery Services** \$843.02 4.7 Last 4 digits of account number 6003 Nonpriority Creditor's Name P.O Box 1880 When was the debt incurred? Voorhees, NJ 08043 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card

☐ Yes

Document Page 21 of 48 Debtor 1 Brandon R. Crossno Case number (if know) 4.8 \$531.74 Sonora Quest Laboratories Last 4 digits of account number 0786 Nonpriority Creditor's Name P.O Box 52880 When was the debt incurred? Phoenix, AZ 85072-2880 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unpaid Medical Bills ☐ Yes 4.9 St. Alexius Medical Center \$200.00 Last 4 digits of account number 6731 Nonpriority Creditor's Name 22589 Network Place When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unpaid Medical Bills ☐ Yes 4.1 Stellar Recovery Inc 5323 \$153.51 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O Box 48370 When was the debt incurred? Jacksonville, FL 32247 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Credit Card

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

| | Case 17-35224 | Doc 1 | Filed 11/27/17 | Entered 11/27/17 17:53:5 | 57 Desc Mair |
|----------|--------------------|-------|----------------|-------------------------------------|--------------|
| Debtor 1 | Brandon R. Crossno | | Document | Page 22 of 48 Case number (if know) | |
| | | | | | |

| | T-Mobile Last 4 digits of account number 2008 | | | |
|---------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----|--|
| | When was the debt incurred? | Nonpriority Creditor's Name PO Box 629025 El Dorado Hills, CA 95762 | 1 | |
| | As of the date you file, the claim is: Check all that apply | Number Street City State Zlp Code Who incurred the debt? Check one. | | |
| | ☐ Contingent | Debtor 1 only | | |
| | Unliquidated | ☐ Debtor 2 only | | |
| | ☐ Disputed | ☐ Debtor 1 and Debtor 2 only | | |
| | Type of NONPRIORITY unsecured claim: | ☐ At least one of the debtors and another | | |
| | ☐ Student loans | ☐ Check if this claim is for a community | | |
| | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | debt Is the claim subject to offset? | | |
| | \square Debts to pension or profit-sharing plans, and other similar debts | ■ No | | |
| | Other. Specify Credit Card | Yes | | |
| \$300.00 | Last 4 digits of account number | United Recovery Service | 4.1 | |
| · · · · · · · · · · · · · · · · · · · | When was the debt incurred? | Nonpriority Creditor's Name 18525 Torrence Ave Suite C-6 | 2 | |
| | As of the date you file, the claim is: Check all that apply | Lansing, IL 60438 Number Street City State Zlp Code Who incurred the debt? Check one. | | |
| | ☐ Contingent | Debtor 1 only | | |
| | ■ Unliquidated | _ | | |
| | · | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | | |
| | ☐ Disputed Type of NONPRIORITY unsecured claim: | ☐ At least one of the debtors and another | | |
| | ☐ Student loans | ☐ Check if this claim is for a community | | |
| | ☐ Obligations arising out of a separation agreement or divorce that you did not | debt | | |
| | report as priority claims | Is the claim subject to offset? | | |
| | Debts to pension or profit-sharing plans, and other similar debts | No | | |
| | ■ Other. Specify Unpaid Medical Bills | ☐ Yes | | |
| \$7,000.00 | Last 4 digits of account number | Western American Loan | 4.1 | |
| | When was the debt incurred? | Nonpriority Creditor's Name 4308 W Missouri Ave Glendale, AZ 85301 | | |
| | As of the date you file, the claim is: Check all that apply | Number Street City State Zlp Code Who incurred the debt? Check one. | | |
| | ☐ Contingent | ■ Debtor 1 only | | |
| | ☐ Unliquidated | ☐ Debtor 2 only | | |
| | ☐ Disputed | ☐ Debtor 1 and Debtor 2 only | | |
| | Type of NONPRIORITY unsecured claim: | ☐ At least one of the debtors and another | | |
| | Student loans | \square Check if this claim is for a community | | |
| | Obligations arising out of a separation agreement or divorce that you did not | debt | | |
| | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | Is the claim subject to offset? | | |
| | | ■ No | | |
| | ■ Other. Specify Car loan deficiency | ☐ Yes | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 23 of 48

| Debtor 1 Brandon R. Crossno | | Case number (if know) | | | |
|------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------|--|--|--|
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| Affiliated Acceptance | Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| PO Box 790001 Sunrise Beach, MO 65079-9001 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Juliuse Beach, MO 03079-9001 | Last 4 digits of account number | | | | |
| Name and Address | On which entry in Part 1 or Part 2 | did you list the original creditor? | | | |
| Comcast | Line 4.10 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| PO Box 3002 Southeastern, PA 19398-3002 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| oddineastern, FA 1999 9002 | Last 4 digits of account number | | | | |
| Name and Address | On which entry in Part 1 or Part 2 | did you list the original creditor? | | | |
| David J. Mauer | Line 4.6 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| 123 W. Madison St., #1500 Chicago, IL 60602 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Officago, IE 00002 | Last 4 digits of account number | | | | |
| | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | - | Total Claim |
|-----------------------|-----|---------------------------------------------------------------------------------------------------------|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total | | | | | _ |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | Total Claim |
| Tatal | 6f. | Student loans | 6f. | \$ | 9,000.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 18,878.39 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 27,878.39 |

| | | 1706000 | III FAUE / 4 UI 40 | |
|---------------------|--------------------------|-------------------|--------------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Brandon R. Cros | sno | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------|-------------------------------------------------------|-------------------|-----------------------------------------|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | |
| | Number | Street | | | - |
| | City | | State | ZIP Code | |
| 2.5 | | | · | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | , | | 0. | | |

| | | Docume | ent Page 25 d | of 48 | |
|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Brandon B. Cros | | | | |
| Debioi | Brandon R. Cros | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filin | ng) First Name | Middle Name | Last Name | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | | |
| Case numb (if known) | per | | | | Chapte if this is an |
| (ii idiowii) | | | | | Check if this is an amended filing |
| | | | | | g |
| Official | Form 106H | | | | |
| | ule H: Your Cod | obtore | | | 42/45 |
| Scried | ule H. Tour Cou | enroiz | | | 12/15 |
| ■ No □ Yes 2. With Arizona | nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. | ı lived in a community pr Nevada, New Mexico, Pu | roperty state or territor lerto Rico, Texas, Wash | ry? (Community property sta | tes and territories include |
| in line Form out Co | 2 again as a codebtor only in 106D), Schedule E/F (Official blumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Z | f that person is a guaran Form 106E/F), or Sched | tor or cosigner. Make | sure you have listed the cr 06G). Use Schedule D, Sch | th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill or to whom you owe the debt at apply: |
| ľ | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line _ | |
| | Number Street City | State | ZIP Code | _ | |
| | | | | _ | |
| 3.2 | Name | | | Schedule D, line | |
| 1 | INAITIO | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line _ | |
| 1 | Number Street | | | _ | |
| (| City | State | ZIP Code | | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 26 of 48

| Fill | in this information to | identify your ca | oco. | | | | | | | |
|--------------------|---------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------|----------------------------|-------------------------------|-----------------------------|------------------------|-----------------|
| | | Brandon R. | | | | | | | | |
| | otor 2 ouse, if filing) | | | | | _ | | | | |
| Uni | ted States Bankrupto | cy Court for the | NORTHERN DISTRIC | T OF ILLINOIS | | | | | | |
| | se number nown) | | | | | | eck if this is: An amended | nt showing p | | chapter |
| \bigcirc | fficial Form | 1061 | | | | | 13 income a | | owing date: | |
| | chedule I: Y | | ome | | | | MM / DD/ Y | YYY | | 12/15 |
| sup spo atta | plying correct infor use. If you are sepa ch a separate sheet | mation. If you rated and you | sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition | ng jointly, and your th you, do not inclu | spouse i de inforr | s living wit nation abo | th you, inclu ut your spo | ide informa use. If more | tion about space is | your needed, |
| 1. | Fill in your emplo | yment | | Debtor 1 | | | Debtor 2 | or non-filin | a spouse | |
| | If you have more th | nan one iob. | | ■ Employed | | | ☐ Emplo | | ig opeass | |
| | attach a separate p | ttach a separate page with | Employment status* | ☐ Not employed | | | ☐ Not employed | | | |
| | employers. | | Occupation | Emergency Room Technician | | | | | | |
| | Include part-time, s self-employed work | | Employer's name | Presence PRV I | Health | | | | | |
| | Occupation may in or homemaker, if it | | Employer's address | 200 S Wacker D Chicago, IL 606 | | | | | | |
| | | | How long employed th | | | for Addition | onal Employ | ment Infor | mation | |
| Esti | | | ate you file this form. If y | you have nothing to r | eport for | any line, wr | ite \$0 in the | space. Inclu | de your noi | n-filing |
| | u or your non-filing s e space, attach a sep | | ore than one employer, co | embine the information | n for all e | mployers fo | or that perso | n on the line | s below. If | you need |
| | | | | | | For D | ebtor 1 | For Debto | | |
| 2. | , , | O ' | ry, and commissions (becalculate what the month) | | 2. | \$ | 975.60 | \$ | N/A | |
| 3. | Estimate and list | monthly overti | me pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Ir | ncome. Add lin | e 2 + line 3. | | 4. | \$ | 975.60 | \$ | N/A_ | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 27 of 48

| Debt | tor 1 | Brandon R. Crossno | | Ca | ase numl | oer (if known) | | | | |
|------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----|-------------|----------------|----------|--------|----------------|-----------------|
| | | | | ı | For Deb | otor 1 | | Debtor | | |
| | Cop | y line 4 here | 4. | -5 | \$ | 975.60 | \$ | | N/A | - |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | 9 | \$ | 52.75 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | 9 | \$ | 0.00 | \$ | | N/A | - |
| | 5c. | Voluntary contributions for retirement plans | 5c. | 9 | \$ | 0.00 | \$ | - | N/A | = |
| | 5d. | Required repayments of retirement fund loans | 5d. | 9 | \$ | 0.00 | \$ | | N/A | - |
| | 5e. | Insurance | 5e. | 9 | \$ | 70.08 | \$ | | N/A | - |
| | 5f. | Domestic support obligations | 5f. | 9 | \$ | 0.00 | \$ | | N/A | - |
| | 5g. | Union dues | 5g. | 9 | \$ | 0.00 | \$ | | N/A | - |
| | 5h. | Other deductions. Specify: | 5h | + 5 | \$ | 0.00 | + \$ | | N/A | - |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 3 | 122.83 | \$ | | N/A | _ |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 3 | 852.77 | \$ | | N/A | - |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | | | 0.00 | \$ | | N/A | - |
| | 8b. | Interest and dividends | 8b. | | \$ | 0.00 | \$ | | N/A | - |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | 0.00 | \$ \$ | | N/A | - |
| | 8d. | Unemployment compensation | 8d. | 9 | \$ | 0.00 | \$ | | N/A | - |
| | 8e. | Social Security | 8e. | 9 | \$ | 0.00 | \$ | | N/A | - |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | _ 8f. | | \$ | 0.00 | \$ | | N/A | - |
| | 8g. | Pension or retirement income | 8g. | | \$ | 0.00 | \$_ | | N/A | - |
| | 8h. | Other monthly income. Specify: Part time job income | _ 8h | + : | \$ | 1,000.00 | + \$ | | N/A | = |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 1,000.00 | \$ | | N/A | A |
| 10 | Cald | culate monthly income. Add line 7 + line 9. | 10. \$ | | 1 05 | 52.77 + \$ | | N/A | = \$ | 1,852.77 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. ψ | | 1,00 | Ψ_ | | IN/A | | 1,032.77 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify: | deper | | , , | | • | | e J. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | . 12. | \$ | 1,852.77 |
| 13. | Doy | ou expect an increase or decrease within the year after you file this form | ? | | | | | | Combine month! | ned y income |
| | | No. | | | | | | | | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 28 of 48

| ebtor 1 Brandon R. Crossno | Case number (if known) |
|----------------------------|------------------------|
|----------------------------|------------------------|

Official Form B 6l Attachment for Additional Employment Information

| Debtor | | |
|---------------------|----------------------------------|--|
| Occupation | | |
| Name of Employer | Pingree Fire Protection District | |
| How long employed | | |
| Address of Employer | 39W160 Plank Rd | |
| | Elgin, IL 60124 | |

Official Form 106I Schedule I: Your Income page 3

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 29 of 48

| Fill | in this information to identify your case: | | Ī | | |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------|-------------------------------------|-----------------------------------------------|
| | otor 1 Brandon R. Crossno | | Che | ck if this is: | |
| | Brandon N. Orossilo | | | An amended filing | |
| 1 | otor 2 ouse, if filing) | | | A supplement show 13 expenses as of | ving postpetition chapter the following date: |
| `` | | | | | |
| Unit | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF | FILLINOIS | | MM / DD / YYYY | |
| 1 | se numbernown) | | | | |
| | fficial Form 106J | | | | |
| | chedule J: Your Expenses | | | | 12/15 |
| info | as complete and accurate as possible. If two married per ormation. If more space is needed, attach another sheet t mber (if known). Answer every question. | | | | |
| Par | | | | | |
| 1. | Is this a joint case? | | | | |
| | ■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Exp | penses for Separate House | ehold of Deb | otor 2. | |
| 2. | Do you have dependents? ☐ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information each dependent | • | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | ■ No |
| | dependents names. | Daughter | | _ 1 | ☐ Yes |
| | | Son | | 8 | ■ No |
| | | 3011 | | | □ Yes ■ No |
| | | Daughter | | 9 | ☐ Yes |
| | | | | | □ No |
| 2 | De versus ermenere in abode | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? | | | | |
| Est exp | Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unpenses as of a date after the bankruptcy is filed. If this is policable date. | | | | |
| the | lude expenses paid for with non-cash government assist value of such assistance and have included it on <i>Sched</i> ficial Form 106l.) | | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence payments and any rent for the ground or lot. | ence. Include first mortgag | e 4. S | \$ | 0.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | \$ | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | · | 0.00 |
| 5 | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such | n as home equity loans | 4d. 5 | | 0.00 |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 30 of 48

| ebtor 1 | Brandon R. Crossno | Case num | ber (if known) | |
|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------|-------------------------|
| Utilit | es: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 0.00 |
| 6b. | Water, sewer, garbage collection | 6b. | · | 0.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 75.00 |
| 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| Food | and housekeeping supplies | 7. | \$ | 400.00 |
| Child | care and children's education costs | 8. | \$ | 125.00 |
| Cloth | ing, laundry, and dry cleaning | 9. | \$ | 50.00 |
| . Pers | onal care products and services | 10. | \$ | 50.00 |
| . Medi | cal and dental expenses | 11. | \$ | 125.00 |
| | portation. Include gas, maintenance, bus or train fare. t include car payments. | 12. | \$ | 250.00 |
| | tainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 125.00 |
| | table contributions and religious donations | 14. | \$ | 10.00 |
| 5. Insur | • | | <u> </u> | 10.00 |
| | t include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| 15b. | Health insurance | 15b. | \$ | 0.00 |
| 15c. | Vehicle insurance | 15c. | \$ | 209.00 |
| | Other insurance. Specify: | 15d. | · - | 0.00 |
| | 5. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Spec | fy: | 16. | \$ | 0.00 |
| | Iment or lease payments: | 170 | ¢ | 0.00 |
| | Car payments for Vehicle 1 | 17a. | | 0.00 |
| | Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | Other. Specify: | 17c. | · | 0.00 |
| | Other. Specify: | 17d. | \$ | 0.00 |
| | payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 746.00 |
| | payments you make to support others who do not live with you. | | \$ | 300.00 |
| | y: Additional support for 3 kids | 19. | · | 000.00 |
| | real property expenses not included in lines 4 or 5 of this form or on Sched | dule I: Yo | our Income. | |
| 20a. | Mortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| | : Specify: Fitness membership | 21. | · | 25.00 |
| | · · · - | | Ť | 20.00 |
| | late your monthly expenses | | • | 0 400 00 |
| | Add lines 4 through 21. | | \$ | 2,490.00 |
| | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. / | add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,490.00 |
| . Calcı | late your monthly net income. | | L | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,319.76 |
| | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,490.00 |
| | | | | , == : |
| 23c. | Subtract your monthly expenses from your monthly income. | 00 - | œ. | -170.24 |
| | The result is your monthly net income. | 23c. | \$ | -170.24 |
| For ex modifi | ou expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your reation to the terms of your mortgage? | | | e or decrease because o |
| ■ No | | | | |
| □ Y€ | s. Explain here: | | | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 31 of 48

| Fill in this infor | rmation to identify your | case: | | | |
|-----------------------------------|----------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------------------------------------------|
| Debtor 1 | Brandon R. Cross | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | | n Individual | Debtor's So | chedules | 12/15 |
| obtaining mone years, or both. | | connection with a bank | | | ment, concealing property, or 0, or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | ruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules fil | ed with this declaration | n and |
| X /s/ Bra | andon R. Crossno | | x | | |
| | Ion R. Crossno | | Signature o | f Debtor 2 | |

Date _____

Date November 14, 2017

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 32 of 48

| Debtor 1 Brandon R. Crossno Pick Nurse Debtor 2 Gasses 6, strong Frest Nurse United States Bankruptory Court for the: Models Nurse United States Bankruptory Court for the: Models Nurse United States Bankruptory Court for the: NORTHERN DISTRICT OF ILLINOIS Statement of Financial Affairs for Individuals Filing for Bankruptory ################################### | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------|---------------------------|----------------------------------|--------------------------------|-----------------------------|--------------------|
| Debtor 2 First Name | Fill in | this inform | nation to identify you | r case: | | | |
| Debtor 2 Case number | Debto | or 1 | | | Last Namo | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Case number | Debto | or 2 | i iist ivaine | Middle Name | Last Ivallie | | |
| Case number Check if this is an amended filling | (Spouse | e if, filing) | First Name | Middle Name | Last Name | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married No | United | d States Bar | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married No | Case | number | | | | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? Pets. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 1930 Wildwood Lane Hanover Park, IL 60133 Mithin the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gefore deductions and exclusions) Boruses, tips Debtor 2 Sources of income Check all that apply. Gefore deductions and exclusions) Boruses, tips | 1 | | | | | | |
| Be as complete and accurate as possible. If wo married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1 | | | | | | | amended filing |
| Be as complete and accurate as possible. If wo married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1 | | | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. | | | | | | | |
| information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part | Stat | ement | of Financial | Affairs for Individ | duals Filing for B | ankruptcy | 4/10 |
| number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before | | | | | | | |
| What is your current marital status? Married Not married Not married Not married Not married No | | | | | this form. On the top of an | y additional pages, write y | our name and case |
| What is your current marital status? Married Not married Not married Not married Not married No | Part 1 | Give D | etails About Vour Ma | arital Status and Where You | Lived Refore | | |
| Married Not married | | | | | Liveu Belole | | |
| Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No | 1. W | /hat is your | current marital statu | is? | | | |
| 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: | | Married | | | | | |
| No | | Not mar | ried | | | | |
| Pebtor 1 Prior Address: Dates Debtor 1 Ived there Debtor 2 Prior Address: Dates Debtor 2 Ived there 1930 Wildwood Lane Hanover Park, IL 60133 Prom-To: 9/15 to 8/16 Same as Debtor 1 From-To: 9/15 to 8/16 Bame as Debtor 1 From-To: 9/15 to 8/16 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a businessed uring this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | 2. D | uring the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| Pebtor 1 Prior Address: Dates Debtor 1 Ived there Debtor 2 Prior Address: Dates Debtor 2 Ived there 1930 Wildwood Lane Hanover Park, IL 60133 Prom-To: 9/15 to 8/16 Same as Debtor 1 From-To: 9/15 to 8/16 Bame as Debtor 1 From-To: 9/15 to 8/16 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a businessed uring this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | _ | 7 No | | | | | |
| Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 2 lived there | | | t all of the places you l | ived in the last 3 years. Do no | ot include where you live nov | ı | |
| Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same as Deb | _ | | , , | · | , | | |
| Hanover Park, IL 60133 9/15 to 8/16 From-To: Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income (before deductions and exclusions) Pobtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips | I | Debtor 1 Pri | ior Address: | | Debtor 2 Prior Ac | ldress: | |
| 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Pert 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | | | | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 |
| states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips | ı | Hanover P | ark, IL 60133 | 9/15 to 8/16 | | | From-To: |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | and territorion | es include Arizona, Ca | ilifornia, Idaho, Louisiana, Nev | vada, New Mexico, Puerto R | | |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | Part 2 | Explain | n the Sources of You | r Income | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) \$31,561.00 Wages, commissions, bonuses, tips | | | | | | | |
| Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$31,561.00 Wages, commissions, bonuses, tips | F | ill in the tota | I amount of income yo | ou received from all jobs and a | all businesses, including part | -time activities. | lendar years? |
| Test. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$31,561.00 Wages, commissions, bonuses, tips \$31,561.00 Wages, commissions, bonuses, tips | |] No | | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$31,561.00 | | - | in the details. | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$31,561.00 | | | | Dahtan 4 | | Dahtan 0 | |
| Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Wages, commissions, bonuses, tips \$31,561.00 \[\begin{array}{cccccccccccccccccccccccccccccccccccc | | | | | Gross income | | Gross income |
| the date you filed for bankruptcy: bonuses, tips bonuses, tips | | | | | (before deductions and | | (before deductions |
| ☐ Operating a business ☐ Operating a business | | | | | \$31,561.00 | _ | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |

Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Case 17-35224 Page 33 of 48
Case number (if known) Document

Debtor 1 Brandon R. Crossno

| | | | [| Debtor 1 | | | | Debtor 2 | | | |
|-------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------|------------------------------------------------|------------|-------------------------------------------------------|--|
| | | | | Sources of income Check all that apply. | (befo | ss income ore deductions and usions) | | Sources of inco Check all that ap | | Gross income (before deductions and exclusions) | |
| For last calendar year: (January 1 to December 31, 2016) | | | Wages, commissions, conuses, tips | | \$29,245.00 | | ☐ Wages, comn bonuses, tips | nissions, | | | |
| | | | [| ☐ Operating a business | | | | ☐ Operating a b | usiness | | |
| | r the calendar you | | 0015\ | ■ Wages, commissions, conuses, tips | | \$35,843.00 | | ☐ Wages, comm bonuses, tips | nissions, | | |
| | | | [| Operating a business | | | | ☐ Operating a b | usiness | | |
| | Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemploymen and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. | | | | | | | | | | |
| | ☐ Yes. Fill in | the details | | | | | | | | | |
| | | | S | Debtor 1 Sources of income Describe below. | each (befo | ss income from a source ore deductions and usions) | | Debtor 2 Sources of inco Describe below. | me | Gross income (before deductions and exclusions) | |
| Pa | rt 3: List Cert | ain Payme | ents You M | ade Before You Filed fo | or Bankru | ptcy | | | | | |
| 6. | Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | | | | | |
| | | Yes Lis | lude payme | | creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not so for domestic support obligations, such as child support and alimony. Also, do not include payments to an bankruptcy case. | | | | | | |
| | Creditor's Na | ne and Ad | dress | Dates of payr | ment | Total amount paid | | Amount you still owe | Was this p | ayment for | |

Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Case 17-35224

Page 34 of 48 Case number (if known) Document Debtor 1 Brandon R. Crossno

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | | | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------|----------------------|-----------------------------|------------------------------|--|--|--|--|--|
| | ■ No | | | | | | | | | | |
| | ☐ Yes. List all payments to an insider. | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | | | | |
| 8. | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. | | | | | | | | | | |
| | ■ No | | | | | | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name | | | | | |
| Do | rt 4: Identify Legal Actions, Repossession | and Fernalesures | | | | | | | | | |
| 9. | Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | | | | |
| | Case title Case number | Nature of the case | | | Status of the case | | | | | | |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Date Value of the | | | | | | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | property | | | | | |
| | | Explain what happened | d | | | | | | | | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | | | | | |
| | Creditor Name and Address | Describe the action the creditor took | | | Date action was taken Amour | | | | | | |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | ion of an assigne | e for the bene | efit of creditors, a | | | | | |
| Pa | rt 5: List Certain Gifts and Contributions | | | | | | | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | tcy, did you give any gift | s with a total value | of more than \$60 | 00 per person' | ? | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Date the g | s you gave lifts | Value | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 35 of 48 Case number (if known)

Debtor 1 Brandon R. Crossno 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Arthur W. Rummler 5/2017 \$1,500.00 **Attorney Fees** 799 Roosevelt Road, Suite 2-104 Glen Ellyn, IL 60137 arthur.rummler@gmail.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details.

Person's relationship to you

Person Who Received Transfer

Description and value of

property transferred

Describe any property or

paid in exchange

payments received or debts

Address

Date transfer was

made

Desc Main Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Page 36 of 48 Case number (if known) Document

Debtor 1 Brandon R. Crossno

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) | | | | | | | | | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|------------------------------------------------------------------------|---------------------------------------------------|-----------------------|------------------------------------------------------|--|-----------------------------------------------|--|--|
| | _ | No Yes. Fill in the details. | | | | | | | | |
| | | ne of trust | Description and | Description and value of the property transferred | | | | Date Transfer was | | |
| | | made | | | | | | | | |
| Par | t 8: | List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and S | torage Unit | ts | | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? | | | | | | | | | |
| | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | | | Last 4 digits of account number | | | Date account was closed, sold, moved, or transferred | | Last balance before closing or transfer | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | | |
| | | No | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | | |
| | | ne of Financial Institution ress (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the contents | | | Do you still have it? | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | | ne of Storage Facility ress (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, S State and ZIP Code) | | Describe the contents | | | Do you still have it? | | |
| Par | t 9: | Identify Property You Hold or Control | • | | | | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | | | |
| | | No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | | ner's Name ress (Number, Street, City, State and ZIP Code) | Where is the proj (Number, Street, City, S Code) | | Describe | the property | | Value | | |
| Par | t 10: | Give Details About Environmental Info | , | | | | | | | |
| For | the pu | urpose of Part 10, the following definition | ons apply: | | | | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | | | |
| _ | | | | _ | | | | | | |

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Page 37 of 48 Case number (if known) Document

Debtor 1 Brandon R. Crossno

| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | | | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------|------------------------------------------------------------------|--------------------|--|--|
| | | Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, 2IP Code) | State and | Environmental law, if you know it | Date of notice | | |
| 25. | 25. Have you notified any governmental unit of any release of hazardous material? | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, S ZIP Code) | State and | Environmental law, if you know it | Date of notice | | |
| 26. | Hav | e you been a party in any judicial or adm | inistrative proceeding under an | ny environ | nmental law? Include settlements a | ind orders. | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ature of the case | Status of the case | | |
| Par | t 11: | Give Details About Your Business or 0 | Connections to Any Business | | | | | |
| 27. | Witl | nin 4 years before you filed for bankrupt | cy, did you own a business or h | ave any o | of the following connections to any | business? | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | | ☐ An officer, director, or managing executive of a corporation | | | | | | |
| | | ☐ An owner of at least 5% of the voting | or equity securities of a corpo | ration | | | | |
| | ■ No. None of the above applies. Go to Part 12. | | | | | | | |
| | | Yes. Check all that apply above and fill | in the details below for each bu | siness. | | | | |
| | | siness Name dress | Describe the nature of the business | iness | Employer Identification number Do not include Social Security | | | |
| | | mber, Street, City, State and ZIP Code) | Name of accountant or bookke | eeper | Dates business existed | iumber of friit. | | |
| 28. | | nin 2 years before you filed for bankrupt itutions, creditors, or other parties. | cy, did you give a financial state | ement to a | anyone about your business? Inclu | de all financial | | |
| | | No Yes. Fill in the details below. | | | | | | |
| | | me dress mber, Street, City, State and ZIP Code) | Date Issued | | | | | |
| | | | | | | | | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Document

Page 38 of 48 Case number (if known) Debtor 1 Brandon R. Crossno

| Part 12: | Sign | Below |
|----------|------|-------|
| | | |

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

| | esult in fines up to \$250,000, or imprisonment for up to 20 years, or both. and 3571. |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------|
| Brandon R. Crossno Signature of Debtor 1 | Signature of Debtor 2 |
| Date November 14, 2017 | Date |
| Did you attach additional pag ■ No □ Yes | ges to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pay s ■ No | someone who is not an attorney to help you fill out bankruptcy forms? |
| ☐ Yes Name of Person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 39 of 48

| Debtor 1 | Brandon R. Cross | sno | | |
|--------------------|--------------------------|-------------------|-------------|-------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Case number | ankruptcy Court for the: | NORTHERN DISTRICT | OI ILLINOIS | |
| f known) | | | | ☐ Check if this is a amended filing |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Creditor's | ☐ Surrender the property. | □No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | _ |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's | По | |
| name: | ☐ Surrender the property. | □ No |
| Description of | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 40 of 48

| Debtor 1 | Brandon R. Crossno | Case number (if known) | |
|-----------------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| name: | | ☐ Retain the property and redeem it. | ☐ Yes |
| Descri | ption of | ☐ Retain the property and enter into a Reaffirmation Agreement. | |
| propei | • | Retain the property and [explain]: | |
| securi | ng debt: | | _ |
| D 10 | Lucy u con a | | |
| in the inf | ormation below. Do not list real estate le | y Leases /ou listed in Schedule G: Executory Contracts and Unexpire eases. Unexpired leases are leases that are still in effect; th y lease if the trustee does not assume it. 11 U.S.C. § 365(p)(| e lease period has not yet ended. |
| Describe | e your unexpired personal property leas | ses | Will the lease be assumed? |
| Lessor's | name. | | □ No |
| | on of leased | | □ No |
| Property | | | ☐ Yes |
| Lessor's | name: | | □ No |
| | on of leased | | _ |
| Property | | | ☐ Yes |
| Lessor's | | | □ No |
| Property | on of leased | | ☐ Yes |
| Lessor's | | | □ No |
| Descripti Property | on of leased | | ☐ Yes |
| Lessor's | | | □ No |
| Descripti Property | on of leased | | |
| Горону | • | | ☐ Yes |
| Lessor's | name: on of leased | | □ No |
| Property | | | ☐ Yes |
| Lessor's | | | □ No |
| Property | on of leased | | ☐ Yes |
| Part 3: | Sign Below | | |
| | nalty of perjury, I declare that I have ind that is subject to an unexpired lease. | licated my intention about any property of my estate that se | cures a debt and any personal |
| X /s/ | Brandon R. Crossno | x | |
| | indon R. Crossno nature of Debtor 1 | Signature of Debtor 2 | |
| Dat | e November 14. 2017 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing tee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 45 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Brandon R. Crossno | | Case No. | | | | |
|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------|------------------------|-----------------|--|--|
| | | Debtor(s) | Chapter | 7 | | | |
| | DISCLOSURE OF COMPENS | SATION OF ATTOR | RNEY FOR DE | EBTOR(S) | | | |
| c | tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of | of the petition in bankruptcy, | or agreed to be paid | to me, for services re | | | |
| | For legal services, I have agreed to accept | | \$ | 1,500.00 | | | |
| | Prior to the filing of this statement I have received | | \$ | 1,500.00 | | | |
| | Balance Due | | \$ | 0.00 | | | |
| 2. T | The source of the compensation paid to me was: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 3. T | The source of compensation to be paid to me is: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 4. I | I have not agreed to share the above-disclosed compen | sation with any other person | unless they are mem | bers and associates of | of my law firm. | | |
| [| ☐ I have agreed to share the above-disclosed compensati copy of the agreement, together with a list of the name | | | | aw firm. A | | |
| 5. I | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | |
| b c | Analysis of the debtor's financial situation, and rendering. Preparation and filing of any petition, schedules, statengen Representation of the debtor at the meeting of creditors. [Other provisions as needed] Preparation and filing of reaffirmation agree. | nent of affairs and plan which and confirmation hearing, ar | may be required; and any adjourned hea | - | cruptcy; | | |
| 5. B | by agreement with the debtor(s), the above-disclosed fee de Representation of the debtors in any adve relief from stay actions or bankruptcy litig | ersary proceeding, discha | | s, judicial lien avo | idances, | | |
| | | CERTIFICATION | | | | | |
| | certify that the foregoing is a complete statement of any annature proceeding. | agreement or arrangement for | payment to me for r | epresentation of the | lebtor(s) in | | |
| No | ovember 14, 2017 | /s/ Arthur W. Run | nmler | | | | |
| Do | | Arthur W. Rumml Signature of Attorne | er | | | | |
| | | Law Offices of Ar 799 Roosevelt Ro | thur W. Rummler | | | | |
| | | Suite 2-104 | oad | | | | |
| | | Glen Ellyn, IL 601 | | | | | |
| | | 630-229-2313 Fa arthur.rummler@ | | | | | |
| | | Name of law firm | _ | | | | |

Case 17-35224 Doc 1 Filed 11/27/17 Entered 11/27/17 17:53:57 Desc Main Document Page 46 of 48

United States Bankruptcy Court Northern District of Illinois

| In re | Brandon R. Crossno | | Case No. | | | | | |
|-------|--------------------------------------------|---------------------------------------------------------------|------------------------------|---------------|--|--|--|--|
| | | Debtor(s) | Chapter 7 | | | | | |
| | VE | VERIFICATION OF CREDITOR MATRIX | | | | | | |
| | | Number of | Creditors: | 16 | | | | |
| | The above-named Debtor(s) (our) knowledge. |) hereby verifies that the list of credit | ors is true and correct to t | he best of my | | | | |
| Date: | November 14, 2017 | /s/ Brandon R. Crossno Brandon R. Crossno Signature of Debtor | | | | | | |

Affiliated Acceptance PO Box 790001 Sunrise Beach, MO 65079-9001

Alexian Brothers Medical Group P.O Box 14000 Belfast, ME 04915

Bank of America c/o NCB Management Services PO Box 1099 Langhorne, PA 19047

Bryan Murphy 1930 Wildwood Ln Hanover Park, IL 60133

Comcast PO Box 3002 Southeastern, PA 19398-3002

David J. Mauer 123 W. Madison St., #1500 Chicago, IL 60602

Fitness 1 Health Club P.O Box 790001 Sunrise Beach, MO 65079

Great Lakes Student Loans PO Box 7860 Madison, WI 53707-7860

Opportunity Financial LLC One Prudential Plaza 130 E. Randolph Street, Suite 3400 Chicago, IL 60601

Professional Recovery Services P.O Box 1880 Voorhees, NJ 08043

Sonora Quest Laboratories P.O Box 52880 Phoenix, AZ 85072-2880

St. Alexius Medical Center 22589 Network Place Chicago, IL 60673

Stellar Recovery Inc P.O Box 48370 Jacksonville, FL 32247

T-Mobile PO Box 629025 El Dorado Hills, CA 95762

United Recovery Service 18525 Torrence Ave Suite C-6 Lansing, IL 60438

Western American Loan 4308 W Missouri Ave Glendale, AZ 85301